Uganda Refugee Operation - Participatory Assessment 2021
National Report
December 2021
About REACH Initiative

REACH Initiative (REACH) facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research – Operational Satellite Applications Programme (UNITAR-UNOSAT). For more information please visit our website. You can contact us directly at: geneva@reach-initiative.org and follow us on Twitter @REACH_info.
Executive Summary

With over 1.5 million refugees,\(^1\) Uganda is the third-largest refugee-hosting country in the world and the largest refugee-hosting country in Africa.\(^2\) Its progressive refugee policy enables refugees to enjoy access to asylum, freedom of movement, the right to work and own a business, and access services such as healthcare and education. However, despite Uganda’s welcoming policy, refugee women, men, girls, and boys of diverse backgrounds face numerous challenges to access protection, economic opportunities, and services such as health care, education, and food assistance.

The 2021 annual age, diversity and gender participatory assessment was organized by UNHCR in collaboration with REACH Initiative and partners working in the refugee operation. The assessment was conducted between October and November 2021 in all 12 refugee-hosting districts in Uganda and in the city of Kampala. The mixed-methods approach that was used combined a phone survey conducted with refugee men and women of diverse age groups across the different settlements and Kampala, complemented with qualitative data collection consisting of key informant interviews (KIIs) and focus groups discussions (FGDs). The KIIs included members of the host community, community leaders and officials, partner staff, and representatives of groups at risk\(^3\) in the refugee community. The aim of the assessment is to ensure the meaningful participation of different groups of refugees and host community members by engaging in a dialogue about their challenges, capacities and proposed solutions.

The findings of the 2021 participatory assessment show that refugee women, men, girls, and boys face a multitude of issues, often aggravated due to age, gender, and other considerations. The assessment also shows that persons of concerns (PoCs)\(^4\) do not always feel that services are being provided as they should be. The identified priority areas vary slightly depending on location, age and gender, although some priorities are common across population groups and locations. However, the overall priority areas for the refugee community were identified to be access to or quality of food assistance, health care, education and shelter.

The main barriers that were reported in accessing services such as food assistance and healthcare were the long distances to reach these services, the lack or limited access to information, language barriers and lack of translators and discrimination. However, the results of the participatory assessment show that certain groups or minorities face these challenges more frequently or at a higher degree. Indeed, ethnic or religious minorities, older persons, children and persons with disabilities, have reported feeling discriminated against by both service providers and other majority groups. Those groups have reported sometimes missing out on services because they are unable to access them due to a lack of transportation or very long

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\(^1\) See UNHCR, (December 2021), https://data2.unhcr.org/en/country/uga

\(^2\) See UNHCR (2021), Uganda joins High-Level officials meeting amid record numbers of refugees in the country

\(^3\) Groups at risk include representative of people with disabilities, of women, of older persons and of ethnic and religious minorities.

\(^4\) Persons of concern include refugees and host community members (including different age groups, nationalities, and vulnerabilities.
distances. Ethnic minorities miss out on services due to language barriers hampering their ability to understand the information provided or communicate with the staff working with service delivery.

Children reported insecurity being a factor limiting their access to services, such as insufficient lighting in the streets at night. Boys tended to report child abuse and exploitation, explaining that members of the host community had taken advantage of their labour by not paying them. Girls also reported feeling insecure when accessing certain services outside their community or fetching resources, reporting gender-based violence (GBV) as their main concern when doing so.

Women, especially girls, in all locations, experience gender discrimination and additional strains on their daily life due to GBV. These insecurities contribute to limiting their access to certain services, and ultimately prevent them from fully enjoying their rights. Girls during the focus group discussions (FGDs) reported alarming levels of child marriage and teen pregnancies, which affected girls' development and prevented them from attending school.

Both refugees and host communities have reported a delicate coexistence where tension often resurfaces due to competition over resources. The assessment also found that certain challenges between different sectors are related, for example one of the challenges reported by the host community to access traditional energy sources was the increasing refugee population. When asked about peaceful coexistence and the relationship between the refugee and host communities, many KIIs mentioned tensions relating to lack of firewood and limited resources.

**Key recommendations**

In the Thematic Analysis, the section on suggested solutions reports comprehensively the participants’ point of view on how to overcome the different challenges identified. This section highlights the main suggestions to all partners involved in the refugee response, such as United Nations (UN) Agencies, non-governmental organizations (NGOs) and authorities, from participants, complemented by UNHCR recommendations based on the analysis of the findings and contextual knowledge.

**Registration**

To facilitate the registration process, often complicated by delays at the registration sites, long distances from the settlement to sites, language barriers and malpractices within the system, the actors working in the refugee response in Uganda should consider:

- Incrementing the number of sites or providing mobile registration services to address the delays.
- Sensitization of community and of all staff working in registration processes on zero tolerance of fraud and corruption.
• Provide special arrangements for persons with disabilities and other persons with mobility challenges, such as transportation and a separate queue.
• Addressing gaps in interpretation and translation services available at the registration sites to overcome language barriers.
• Where reports of malpractices are recorded, channel the reported malpractices to responsible entities for investigation in a timely manner and where necessary prosecution or other outcomes in accordance with established procedures.
• Ensure close review and monitoring of crowd management processes at registration and verification sites to mitigate risks of fraud by “brokers” who approach asylum-seekers and refugees during such processes with promises to facilitate access and / or fast-track registration in exchange for payment.

Legal services and justice

Participants have voiced that legal and justice services, provided by partners and the justice system, are often slow or that there is a perception that concerns are not taken seriously by partners, law enforcement and judiciary including courts. In addition, sometimes PoCs feel that they lack information on services available and encounter malpractice from the service providers.

Recommendations to address those challenges include:

• Strengthen the capacity of partners, judiciary and police staff through regular trainings to ensure respectful treatment of beneficiaries by implementing sensitization and advocacy activities on code of conduct, human rights, legal procedures and on channels to report and handle complaints of malpractice.
• Enhance sensitization sessions with the refugee community and dissemination of information on the available services, refugees’ rights and obligations, complaints and reporting channels on malpractices and on process for handling complaints that are reported.
• Strengthen the follow-up and ensure that actions are taken and feedback is provided to the refugees.
• Enhance mobile courts and e-justice systems.

Safety and Security

Despite the fact that, overall, the study participants did not voice safety and security as a major concern, physical violence and attacks were often reported to happen both within and outside the communities. Particularly, locations such as Kyaka II, Oruchinga, Palorinya and Rwamwanja seemed to experience such incidents more often compared to other locations. Therefore, to improve the safety and security situation of PoCs, the following recommendations are made:

• Investigate further the causes / roots of the issue in the locations where safety and security concerns were reported more frequently.
• Mapping with the community members the most perceived unsafe areas and increase the presence of security and surveillance services.
• Raise awareness in the community on how to access police and security services and report security issues.
• Enhancing community-led initiatives for increased safety, such as through neighbourhood watch groups or community patrols.

**Gender-Based Violence (GBV)**

The participants to this assessment often voiced barriers in reporting GBV incidents related to fear of stigma and fear of repercussions. In Kampala, most of the participants were unaware of the GBV services available. In order to reduce the prevalence and the perception of the community on the heightened risk to be exposed to GBV and to improve the access to GBV services to both prevent and address GBV concerns, it is recommended to:

• Update and disseminate information on referral pathways to increase awareness on where and how to access GBV services in Kampala
• Strengthen multi-sectoral GBV response services, including psychosocial support and counselling services within the communities through trained professionals, in tandem with ensuring that the survivor and their family are protected from retaliation and perpetrators.
• Continue to raise awareness to address the root causes of GBV such as gender inequality, the dangers of GBV, including rape against women and girls, and the importance of timely reporting cases to access services and holding perpetrators accountable.
• Strengthen the capacity of community based structures on GBV prevention and response.

**Peaceful coexistence**

Despite the fact that participants generally reported an overall good relationship with host communities and among refugee groups, some locations such as Nakivale and Oruchinga most commonly reported clashes with the host community. According to the majority of the participants, the clashes with the host community are often related to competition for scarce resources and for land. In order to address those concerns, it is recommended to:

• Address the tensions between the refugee and host community by conducting Behaviour Change Communication (BCC) programs focusing on peaceful coexistence, establishing and raising awareness on clear rules around issues such as land ownership and sharing of natural resources, and increase community initiatives that foster dialogue.
• Conduct continuous community sensitization on the importance of peaceful co-existence and sharing of resources, and foster community dialogue and engagement activities between the refugee and host communities.
• Implement shared and transparent projects targeting both refugee and host communities especially when involving resource allocation.
• Improve resource management to mitigate consumption and deterioration and hence competition over scarce resources.
Health

Most of the participants reported sufficient access to the available health services in their communities. On the other hand, many of them were not satisfied with the quality of the service received, often reporting that services were not meeting their needs. Participants indicated that often the long queue to access health services, the distance to the health centres and the lack of sufficient health workers made their experience not satisfactory. Therefore, to address those challenges, health partners are encouraged to:

- Strengthen the capacity of health facilities by recruiting more health workers, particularly more female staff to ensure a more equitable gender balance.
- Improve transport systems to health facilities.

Livelihoods

Overall participants reported good accessibility of livelihoods services; however, services were not always able to meet their needs. This was particularly voiced by Kyaka II and Nakivale participants and more broadly by representatives of groups at risk. Some participants were unaware of livelihoods services, particularly in Kampala. To improve access to livelihoods opportunities, tailored to the PoCs’ needs, it is recommended to:

- Expand livelihood services including access to start-up capital, to enable refugees to start their own businesses.
- Improve information sharing and community participation in livelihood programming.
- Include groups at risks in the targeting of livelihoods interventions and develop programmes tailored to their needs.
- Target livelihoods intervention on the basis of PoC capabilities, interest and market characteristics.

Education

The data was collected during the prolonged school closure, therefore many concerns were related to children being out of school and limited capacity of worse-off family to support distance learning. In addition, participants elaborate on the reasons for children being out of school before the COVID-19 pandemic, indicating lack of financial resources from the family as one of the most common reasons. Teenagers’ pregnancy and early marriage were often mentioned as a main concern for girls’ attendance. Education and humanitarian partners are encouraged to:

- School closure during COVID-19 pandemic showed the importance to ensure that all children (including those from less well-off families) have access to education by remote learning by providing more reading materials and study gadgets such as phones and radios, and setting up small home classes with teachers to support remote learning.
- Support families in covering school related costs such as school fees, materials and uniforms.
• Sensitize the community on the importance of education and encourage refugees to enrol in national schools.
• Take actions to sensitize parents and the community against the practice of early marriage and address the causing factors behind early marriage and teenage pregnancies.

**WASH**

Participants were unanimous in reporting challenges in accessing enough water both for drinking and domestic purposes. The challenge was particularly reported by participants living in Kyaka II and Nakivale. It is recommended that partners working in the refugee response:

• Address overcrowding and insufficient supply of water by increasing the number of boreholes and ensure that malfunctioning water sources are repaired timely.
• Increase the number of water sources in the communities to avoid queues and long distances between water points and communities.
• Provide the communities with WASH sensitization, especially on water systems management, proper hygiene, use of latrines and waste disposal.

**Energy & Environment**

Half of the participants to the study reported a lack of access to sufficient energy for cooking and lighting purposes. Clean energy sources were also reported to be too expensive and not affordable. The host community voiced that the increasing refugee population is affecting their access to resources. Regarding waste management, the most common reported ways to deal with it were using pits and burning the waste. To address those challenges and improve access to energy and waste management techniques, partners are encouraged to:

• Facilitate access to clean and renewable energy sources through cost sharing and other type of supports.
• Raise continuous awareness on the importance of environmental conservation, climate adaptation and resilience.
• Enhancing and increase resource allocation for tree planting projects both to provide jobs and counter deforestation.

**Shelter**

Participants voiced the lack of shelter material or their unaffordability. In addition, persons with specific needs were often not able to make repairs to their shelters when they were damaged. To improve the shelter conditions of the PoCs, partners should:

• Strengthen the capacity of community members to construct and maintain their homes, by providing trainings and workshops to teach refugees how to produce their own shelter materials.
• Improve the quality of building materials to make them more resistant to bad weather.
• Support people with special needs and the most vulnerable households in implementing needed repairs.
• Invest in renewable building materials to ensure sufficient shelter materials
• Sustainable settlement land use is maximised to optimal mutual benefit for refugees and host communities to improve livelihoods and access for construction materials
• Mitigate environmental degradation that has inflated due to unsustainable sourcing of construction materials for refugee shelters.

Community Participation and AAP

Participants reported that they faced challenges in accessing community support mechanisms, such as Refugee Welfare Committees (RWCs), block leaders, thematic committees, religious leaders, etc., with roughly half of refugees in settlements reporting challenges to access such support mechanisms. Reported challenges were often related to malpractice (mostly request for payment in exchange for services) in the system and delays in response. As a means of enabling more refugees to access these community support mechanisms, the following steps should be put in place:

• Raise awareness on the presence and roles of existing community structures and communication channels and promote their accessibility by bringing services closer to the community, for example through providing transportation means to community structures, such as distributing bicycles.
• Take measures to address the barriers reported, including increasing awareness on channels to report incidents of malpractice and improving timelines for response.

Strengthen the capacity of existing community structures through trainings and material support to facilitate them to conduct their work, and continue to involve refugees and host communities in planning processes and the design, implementation and monitoring of projects.
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Geographic Classifications

Host Community

Communities in their area of origin hosting displaced persons (including both internally displaced persons and refugees).

Settlements

According to the Refugee ACT 2006 (section 44), settlements are designated places or areas on public land to be refugee settlements for the purpose of offering local settlement and integration of refugees whose applications for refugee status have been granted.

Abbreviations and Acronyms

AAP  Accountability to Affected Populations
FGD  Focus Group Discussion
GBV  Gender-Based Violence
KII  Key Informant Interview
NFI  Non-Food Item
OPM  Office of the Prime Minister
PoCs  Persons of Concern
RWC  Refugee Welfare Committee
UNHCR United Nations High Commissioner for Refugees
WASH Water, Sanitation and Hygiene

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5 The Refugee Act, adopted by the Uganda Government in 2006 provide a definition of settlements in section 44.
**Operational Context**

Uganda hosts 1,573,291 refugees and asylum-seekers as of 31 December 2021. The main population groups comprise 958,968 refugees from South Sudan (61%), 456,537 from the Democratic Republic of Congo (DRC) (29%), 53,992 from Somalia (3%), 47,998 from Burundi (3%), and 25,772 from Rwanda (1%) and a smaller number from other nationalities. The vast majority of refugees are hosted in settlements in 12 refugee-hosting districts in northern and mid/south-western Uganda, while 5% of them reside in urban Kampala.

Fifty-seven (57) percent of the refugee population are children, while 23 percent are women above 18 years old. Those two groups together make up 82% of the total population of concern. Forced displacement impacts people differently, depending on age, gender, and diversity. Understanding and analysing the impact of intersecting personal characteristics on people’s experiences of forced displacement are necessary for an effective response.

**Background**

Participatory assessments are one of UNHCR’s primary tools to obtain a comprehensive understanding of the situation of persons of concern (PoCs) and host communities and the evolving context as they experience it. It is a process of building partnerships with refugee women, men, girls, and boys of diverse backgrounds by promoting meaningful participation through structured dialogue. The participatory assessment also provides affected populations with the opportunity to explain the protection risks and challenges they face when accessing the different services and to participate as partners in the design of programmatic responses to issues affecting their lives. This includes identifying:

- The problems and risks faced by women, men, girls, and boys in refugee and host communities;
- The strategies and coping mechanisms they employ to manage these problems and risks;
- The priorities they have for programming;
- Community and local capacities that should be supported;
- Opportunities and constraints that will affect the implementation of programs.

The participatory assessment seeks to promote meaningful participation of refugees in shaping UNHCR and partners’ interventions, to ensure that programs are informed by the perspectives of refugee and host women, men, girls, and boys of diverse backgrounds and that the communities’ capacities are mobilized in pursuing solutions to the issues faced. In Uganda, UNHCR, in collaboration with governmental and NGO partners, communities of concern, and other stakeholders, conducts the participatory assessment exercise on an annual basis in refugee-hosting districts and in Kampala.

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The **2021 round of the participatory assessment** involved a close collaboration between UNHCR and REACH, with UNHCR and partners in charge of data collection, and REACH providing support in the data analysis and interpretation, as well as the final redaction of the report.

**Methodology**

This participatory assessment was based on a mixed-methods approach and combines remote quantitative data collection and in-person qualitative data collection tools. A phone survey was conducted with the refugee population across all settlements and Kampala. The inter-agency Feedback, Referral, and Resolution Mechanisms (FRRM) call centre operated by UNHCR was responsible for conducting the outbound calls for the phone survey. A total of **882 phone surveys** were conducted in the settlements, and an additional **66 phone surveys** were completed with refugees residing in Kampala. The phone surveys covered a wide range of topics, including registration, protection, health, livelihoods, water and sanitation, energy and environment, and accountability to affected populations.

The phone survey was complemented with qualitative data collection consisting of key informant interviews (KII) and focus group discussions (FGD). KII were conducted with the representatives of specific groups in the refugee community such as people with disabilities, women, older persons and minority groups, as well as with local authorities, including the Office of the Prime Minister (OPM) settlement commandants, community leaders, partners delivering services, and host community representatives. A **total of 183 KII** were conducted: 42 KII with key stakeholders, 109 KII with groups at risk, and 32 KII with host community representatives. **Forty-six (46) focus group discussions (FGDs)** were carried out with children between 12 and 17 years old. The qualitative data was collected by UNHCR offices and its partners in the respective locations.

The data was collected by UNHCR and its partners between October and November 2021.

**Sampling**

For the phone survey, respondents, hereafter referred to as “*refugee respondents*”, have been randomly selected from the ProGres database. Only refugees, and no-host communities, were included in quantitative data collection. Sample sizes have been determined for each settlement and Kampala with a 90% confidence interval and 10% margin of error. Quantitative data collection took place in all 13 refugee settlements and Kampala. Table 1 below shows the sample sizes achieved per location. Both men and women were surveyed, all between the ages of 18 and 59. For more information regarding the demographics of the quantitative sample, see the demographics sub-section in the thematic analysis section.

Participants for the KII and FGDs were purposively sampled in order to ensure adequate representation in terms of age, gender, nationality, ethnicity and cultural background, and involvement of groups with specific needs. The FGDs were held with refugee children aged 12 to 17 across the settlements and Kampala. For the KII, exact sampling depended on the type of KII.
Three separate KII tools were deployed, for which participants were sampled depending on expertise. Table 1 below shows the number of FGDs and KIIs per location.

**Table 1: Summary of data collected per location**

<table>
<thead>
<tr>
<th>Hosting districts</th>
<th>Refugee settlements</th>
<th># of phone surveys</th>
<th># of FGDs</th>
<th># of KIIs</th>
<th>Community representatives (specific groups)</th>
<th>Host community representatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjumani</td>
<td>Adjumani</td>
<td>69</td>
<td>8</td>
<td>1</td>
<td>11</td>
<td>3</td>
</tr>
<tr>
<td>Yumbe</td>
<td>Bidibidi</td>
<td>70</td>
<td>5</td>
<td>5</td>
<td>14</td>
<td>5</td>
</tr>
<tr>
<td>Terego</td>
<td>Impevi</td>
<td>70</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Kiryandongo</td>
<td>Kiryandongo</td>
<td>71</td>
<td>2</td>
<td>2</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Kyegwga</td>
<td>Kyaka II</td>
<td>70</td>
<td>2</td>
<td>2</td>
<td>10</td>
<td>3</td>
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<tr>
<td>Kikuube</td>
<td>Kyangwali</td>
<td>70</td>
<td>6</td>
<td>1</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Koboko</td>
<td>Lobule</td>
<td>45</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>2</td>
</tr>
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<td>Isingiro</td>
<td>Nakivale</td>
<td>72</td>
<td>6</td>
<td>3</td>
<td>6</td>
<td>2</td>
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<td></td>
<td>Oruchinga</td>
<td>65</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td></td>
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<td>Lamwo</td>
<td>Palabek</td>
<td>68</td>
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<td>1</td>
<td>7</td>
<td>1</td>
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<tr>
<td>Obongi</td>
<td>Palorinya</td>
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<td>2</td>
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</tr>
<tr>
<td>Madi Okollo</td>
<td>Rhino Camp</td>
<td>70</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Kamwenge</td>
<td>Rwamwanja</td>
<td>71</td>
<td>2</td>
<td>2</td>
<td>8</td>
<td>2</td>
</tr>
<tr>
<td>Kampala</td>
<td>Kampala</td>
<td>66</td>
<td>5</td>
<td>14</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>948</strong></td>
<td><strong>46</strong></td>
<td><strong>42</strong></td>
<td><strong>109</strong></td>
<td><strong>183</strong></td>
<td><strong>32</strong></td>
</tr>
</tbody>
</table>

**Focus Group Discussions**

FGDs served to provide in-depth information regarding the experiences of refugee children in the settlements and Kampala. The focus on refugee children aged 12 to 17 was motivated by the need to not exclude the perspectives of this especially vulnerable group. Mixed and separate FGDs were conducted with boys and girls, and each focus group had between 10 and 20 participants. The data was collected by UNHCR and various partners in line with UNHCR’s 2012 Listen and Learn, Participatory Assessment with Children and Adolescents. Table 2 below contains a more detailed overview of the composition of each FGD.

**Table 2: Composition of conducted FGDs**

<table>
<thead>
<tr>
<th>FGD composition</th>
<th># of FGDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys aged 12 to 17 from the DRC</td>
<td>2</td>
</tr>
<tr>
<td>Boys aged 12 to 17 from the DRC and South Sudan</td>
<td>2</td>
</tr>
<tr>
<td>Boys aged 12 to 17 from the DRC, Rwanda and South Sudan</td>
<td>1</td>
</tr>
<tr>
<td>Boys aged 12 to 17 from South Sudan</td>
<td>11</td>
</tr>
<tr>
<td>Boys aged 12 to 17 from Uganda</td>
<td>1</td>
</tr>
<tr>
<td>Boys aged 12 to 17 from the DRC</td>
<td>1</td>
</tr>
</tbody>
</table>

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8 A tool developed by UNHCR to set specific consideration to be taken into account when collecting data with children and adolescents.
Girls aged 12 to 17 from the DRC  5
Girls aged 12 to 17 from the DRC and Rwanda  1
Girls aged 12 to 17 from the DRC and South Sudan  1
Girls aged 12 to 17 from South Sudan  13
Girls aged 12 to 17 from Uganda  1
Boys and girls aged 12 to 14 from Burundi, the DRC and Rwanda  2
Boys and girls aged 15 to 17 from Burundi, the DRC and Rwanda  1
Boys and girls aged 15 to 17 from Burundi, the DRC, Rwanda, and Sudan  1
Boys and girls aged 12 to 14 from Rwanda  1
Boys and girls aged 12-14 from DRC, Burundi and Rwanda  1

Total  46

Key Informant Interviews
KIIs were conducted with community representatives and experts across three categories to better understand the issues and barriers faced by refugees and host communities when accessing the different services and assistance. The three KII targets were:

1) **key stakeholders**, such as OPM settlement commandants, refugee leaders and cross-sectoral experts in the delivery of services, hereafter referred to as “key stakeholders KIs” and “KIIs with key stakeholders”

2) **representatives of various specific groups** that are considered to be at risk in the refugee community or have specific needs, such as women, people with disabilities, older persons or ethnic or religious minorities, hereafter referred to as “groups at risk KIs” and “KIIs with groups at risk”

3) **representatives of host communities**, hereafter referred to as “host KIs” and “KIIs with host community representatives”

Table 3 indicates the profiles of the key informants per the three categories of tools. For the key stakeholders, the exact position is not included as it can be considered personally identifiable information.

Table 3: Profiles of key informants
Other minority (gender minority) 2  
Host community representatives 
Male 24  
Female 8  
Total 183  

Data Analysis  
UNHCR and partners collected all data through the KOBO platform and shared the anonymized data with the REACH team for checking and cleaning throughout the data collection. The data was analysed in line with the data analysis plan and framework. Quantitative data was analysed using the software R,\(^9\) focussing on key disaggregation per variable such as location, country of origin, and age. Analysis of FGDs has been conducted through the construction of a data saturation and analysis grids, in order to identify patterns across the FGDs. The KIIIs were analysed in an analysis grid, primarily using Excel.

Limitations  
For the phone surveys, only refugees registered in ProGres with a working phone number could be selected for the sample. As a result, despite the random selection of phone numbers, the samples cannot be considered representative of the populations. Additionally, the sampling target of 70 respondents per settlement was not reached in all locations. For those locations, the confidence interval of 90% and margin of error of 10% cannot be applied to the findings. For these reasons, caution must be taken when interpreting findings, especially those disaggregated by location. Therefore, the findings reported in this report shall be interpreted as the point of view of the respondents to the phone survey and not necessarily representative of the overall refugee population.

The views expressed by the participants in the FGDs and KIIIs does not represent the views of the entire refugee community but rather of the participants purposively selected for the exercise. While efforts were made to include a diverse group of individuals taking into account age, gender, and other diversity factors, as well as to provide a voice to marginalized groups, it might be possible that some individuals and groups do not feel that the findings in the report represent them.

Furthermore, since the data was collected by different enumerators and facilitators in different locations, with varying degrees of expertise in data collection, the collected data may not all be of the same quality and there may have been differences in the interpretation of questions or answers. However, through training of enumerators and facilitators and the distribution of key terms and definitions, the operation endeavoured to mitigate such risks as much as possible.

\(^9\) https://www.r-project.org/about.html
Findings

Demographics

Before delving into the findings of the phone survey, it is important to understand the exact composition of the quantitative sample. Key variables that will be used to disaggregate the data in further sections will be highlighted here. As can be seen below, the sample had a reasonably even split between men and women. The majority of respondents of the phone survey were between 25 and 39 years old.

Figure 1 Phone survey respondents by gender  Figure 2 Phone survey respondents by age breakdown

![Gender and Age Breakdown](image)

The majority of refugees in Uganda are from South Sudan (roughly 61%). In the phone survey sample, 57% of refugee respondents in settlements were from South Sudan, compared to only 8% of refugee respondents in Kampala. In Kampala, the majority of refugees in the sample were from the DRC (41%). The chart below shows the further breakdown of the nationality of refugees, presented separately for refugees in the settlements and those in Kampala. There appears to be a correlation between the choice of residence and nationality. For example, 23% of refugee respondents in Kampala are from Eritrea, compared to only 1% of refugee respondents in the settlements.

Figure 3 Breakdown of nationality of respondents both in settlements and Kampala

![Nationality Breakdown](image)

Whenever relevant, the findings are disaggregated per gender, age and location. If such disaggregation is not presented, it can be assumed that the findings were common across those groups.
Thematic Analysis

The thematic analysis covers the community members, experts and local authorities’ perception on accessing the different services, the main challenges encountered while accessing them, and the community members’ suggestions on how to address those challenges reported during the KII and the FGDs.

Registration and Documentation

Registration and documentation are the first steps in ensuring protection and facilitating access to basic services for refugee women, men, girls and boys. It is essential for the identification of persons with specific needs within a population which in turn is vital for an appropriate protection response.10

Perceptions in accessing registration and documentation services

Findings from the participatory assessment show that, overall, **74% of respondents in settlements reported at least one issue related to accessing registration services.** In some settlements, this percentage was significantly higher. Registration issues were most commonly reported in Nakivale and Palabek, where 96% of refugee respondents reported to have struggled

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10 UNHCR Guidance on Registration and Identity Management
accessing registration services. This could be due to the fact that these settlements are among those that still receive and register new arrivals, compared to other settlements that are no longer receiving new arrivals and focus on continuous registration and family reunification. In Nakivale, 65% of those reporting to face challenges indicated that malpractice was at least one of the challenges faced. In Palabek, the most commonly reported challenge was procedural delays (75% of respondents). In Kampala, 53% reported at least one challenge, which is relatively low compared to the average in the settlements.

Figure 4 % of refugee respondents reporting facing challenges accessing registration and documentation services, by settlement

While the majority of refugees residing in settlements reported challenges in accessing registration/documentation services, half of refugees residing in Kampala reported such challenges.

Challenges in accessing registration and documentation services
Among the refugees in the settlements that reported facing challenges to access registration and documentation, 47% reported procedural delays and 25% reported malpractices in the access to registration and documentation services. Of the 25% of respondents who reported malpractices in the access to registration and documentation services, the vast majority reported the request for payment in exchange for services (87%). Procedural delays and long distances to the registration sites were reported as main challenges by roughly half of KIs for groups at risk; this was also confirmed by key stakeholders when asked about different challenges experienced by the refugee community.
The figure below shows the difference in reported challenges in accessing registration services across settlements. Procedural delays seem to be an issue particularly for Palabek, Nakivale and Rhino Camp; while malpractices in the access of services particularly stands out for Nakivale.

One out of four representatives of groups at risk reported discrimination at the registration site as a challenge, compared to 6% of refugee respondents. Of the refugee respondents in settlements reporting discrimination as a barrier to accessing registration and documentation services, the most dominant locations were Imvepi (14%), Kiryandongo (13%) and Palabek (10%), as is illustrated by the graph below.
Key stakeholder KIs did not mention discrimination as an issue they consider refugees experience at the registration site. When asked to elaborate on the malpractice in access of registration services, 12/109 groups at risk KIs reported that the malpractice consisted of payment in exchange for services. The case of unregistered children was also often mentioned by groups at risk KIs, with one KI explaining that many families have children who joined their family later, but the long waiting lines would prevent them from registering their child. Discrimination based on nationality was also often mentioned during key stakeholder KIIs (8/42), which was reported alongside language barriers (22/42) and lack of translation services (10/42).

**Suggested solutions from the community and other interviewed key stakeholders**
- Decentralization of registration services to settlements, zones and villages.
- Improve the supervision of staff and enforce awareness among staff on corruption and upholding integrity and best practices.
- Increase the number of staff conducting registration and employ multiple translators.
- Provide transport support to persons with specific needs to and from the registration services.
- Conduct community sensitization on registration procedures and requirements.
- Provide special arrangements for people with disabilities and older persons, such as creating a separate line and providing shade.
- Allocate different days to different nationalities to reduce pressure at registration office and increase efficiency.
- Community leaders to play a more active role in identifying unregistered refugees, including children.
- Ensure that complaint mechanisms can be accessed by all members of the community.
- Community should be sensitized on zero tolerance of fraud and how to report it using the relevant helplines and other complaints mechanisms. Those who engage in fraud should be identified and action taken accordingly.
Legal services and Justice

Perceptions in accessing legal, justice, and police services

Less than half (39%) of the refugee respondents residing in settlements reported to have experienced at least one challenge when accessing legal, justice and police services; 35% of refugee respondents reported experiencing no challenge at all and 26% reported not knowing or not wanting to answer. In Kampala, 29% of refugee respondents reported at least one issue, and 53% reported not knowing or not wanting to answer.

Challenges in accessing legal services, justice systems, and courts

The most commonly reported main challenge in accessing legal services, justice systems and courts in the settlements was malpractices within the system (15%), which were nearly always said to be the request for payment (95%). Other reported challenges were lack of physical presence of such services within the settlements (10%), and lack or delay in response and feedback (10%). In Kampala, the most commonly reported challenges were lack of or delay in response and feedback (9%) and malpractice within the system (8%).
Host community KIs in Kampala mostly agreed with refugee respondents that the most common barrier to accessing legal services was **malpractice within the system** (2/4) but also added **language barriers and lack of information on procedures** (2/4) as a challenge. On the other hand, half of host community KIs in the refugee-hosting districts (13/26) reported **the lack of information** on legal procedures and access point as the most common barriers to accessing legal services, followed by malpractice within the system (12/26), and lack of access to legal assistance (9/26). Both host community KIs residing in Kampala and in refugee-hosting agreed that a request for another form of benefit or payment in exchange for services was the main malpractice in the justice system.

KIs representing groups at risk more often indicated that these groups were facing challenges when accessing legal services, such as **request for payment in exchange for services** (16/109). One KI added that there was a “**Lack of coordination among the community to help persons with disabilities access justice, and that community leaders tend to work with the law enforcers and contribute to oppressing the disabled more**.”

For key stakeholder KIs, the most commonly reported reason for challenges in accessing legal services and justice systems that refugees faced was the lack of information about the law (10/42) followed by expensive legal processes (8/42).

The majority of refugee respondents reported to be unaware of any impact of COVID-19 on the access to legal services (73%).

**Challenges in accessing police services**

In terms of accessing police services, 66% of refugee respondents in settlements reported at least one issue, compared to 33% of refugee respondents in Kampala. **Malpractice within the police system** was reported as a challenge in accessing police services across all types of targeted respondents. Of the 34% of refugee respondents in settlements who reported malpractice in the police system, nearly all (95%) explained police would request payment in exchange for services.
In addition to malpractices within the system, delay in response and feedback, and cases not being taken seriously, groups at risk KIs also reported other challenges in accessing police services such as a lack of physical presence within the settlements (22/109) and facing discrimination (12/109). One KI even reported denial of services. A woman with a disability, from South Sudan, explained during a KII that there was a “lack of interpreter, lack of transport to follow up, and police and community leaders lack motivation to follow up cases”. Another older male KI added that “police request for money for fuel to arrest suspects. Most PoCs cannot afford to pay the money and give up on reporting.”

Suggested solutions from the community and other interviewed key stakeholders

- Implement sensitization and advocacy activities on code of conduct, human rights and legal procedures.
- Strengthening management and monitoring systems.
- Improve coordination between legal actors and actors at the community level.
- Recruit translators at the police posts.
- Implement regular capacity-building initiatives targeting partners, judiciary, police and community members.
- Strengthen systems to address malpractice and enhance sensitization sessions in the settlements on available services, refugees’ rights and obligations, and reporting channels on malpractices, and ensure that actions are taken and feedback is provided to refugees.
- Strengthening case management and follow-up and feedback systems.
- Conduct trainings for refugee representatives/leaders on the rights of people with disabilities.
- Enhance awareness of the legal services available in the refugee settlements.
- Implement an independent team to follow-up cases registered at the police services to check any ignored cases as a result of discrimination or other reasons.
- Enhance mobile courts and e-justice systems.
- Inclusion of community members in the judicial watch team, and have refugee lawyers.
Safety and Security

General perception of safety

When asked to rate the level of security within or outside their community, refugee respondents were offered the following options: very good, good, okay, poor and very poor. They could also choose the option “I do not know / I do not want to answer”. Okay is to be interpreted as neither good nor poor.

Across all settlements, a relatively low proportion (12%) of refugee respondents rated the safety in their community as poor or very poor whereas 18% reported the same in Kampala. As for the perception of safety outside the community, overall, 8% of refugee respondents in settlements rated the safety outside of the community as poor or very poor. There are a few settlements where this percentage is higher, notably in Oruchinga (25%) and Kyaka II (23%).
In Kampala, a relatively higher percentage of men rated the safety inside their community as poor, 21% compared to 15% of women. In the settlements, this gender disparity is less significant as 11% of men and 13% of women rated the safety as poor or very poor.

In terms of safety outside the community, the patterns are rather similar. The settlement with the highest percentage of refugees reporting poor or very poor safety outside their community was Oruchinga (19%). In Kampala, safety outside the community is generally rated better than by respondents in settlements, as only 5% of refugee respondents in Kampala rated the safety outside the community as poor or very poor.

**Security challenges inside the community**
The most reported security challenges faced by the refugee community living in the settlements in the year prior to data collection inside their community were robbery, physical violence or attacks and house break-ins. GBV was reported by 17% of the female refugee respondents, slightly more common than by male refugee respondents (13%). Furthermore, refugees residing
in Kampala more commonly reported physical violence as a safety concern than refugees residing in settlements.

Figure 12 Major security challenges experienced by community members inside their community in the year prior to data collection, as reported by refugees residing in settlements

According to the FGDs carried out with refugee children, the most commonly reported dangers for boys and girls within the community were teenage pregnancies, as reported in 22 out of 46 FGDs, which might be closely linked to another commonly reported danger around forced and teenage marriages (13/46). This danger was reported to more commonly impact young girls than young boys, and was more often reported in female FGD groups. The second most frequently reported danger for boys and girls was gender-based violence (19/46), with rape and defilement being mentioned throughout many of the FGDs with children. Other types of security incidents that were frequently reported were theft and robbery (10/46), attacks and kidnapping (8/46), and even killings (3/46). These types of security incidents were more frequently mentioned in FGDs with boys.

Table 4 Most frequently reported dangers within the communities reported during children FGDs

<table>
<thead>
<tr>
<th>Reported dangers inside the community</th>
<th># children FGDs (total = 46)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teenage pregnancies</td>
<td>22</td>
</tr>
<tr>
<td>Gender-based violence</td>
<td>19</td>
</tr>
<tr>
<td>Forced and teenage marriages</td>
<td>13</td>
</tr>
</tbody>
</table>

The two most commonly reported reasons for these dangers for boys and girls in the communities reported during the FGDs with children were the lack of parental guidance and the lack of satisfied basic needs such as food items and NFIs (20/46), followed by children hanging
out with wrong crowds and as such being influenced by bad peers (17/46) and the use of alcohol, which was reported to have increased since the lockdown (18/46).

Table 5 Most frequently reported reasons for reported danger within the communities reported during children FGDs

<table>
<thead>
<tr>
<th>Reported reasons for reported dangers</th>
<th># children FGDs (total = 46)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of parental guidance</td>
<td>20</td>
</tr>
<tr>
<td>Lack of satisfied basic needs</td>
<td>20</td>
</tr>
<tr>
<td>Increased use of alcohol since lockdown</td>
<td>18</td>
</tr>
</tbody>
</table>

In general, it was said in 11 FGD groups that safety concerns had increased since the lockdown came into place, with 4 FGDs mentioning that school closure was the main reason. Children in 7 FGDs reported that there was a lack of security actors in place within their community, and children in 5 FGDs reported that they did not feel like their voices were listened to in decision-making and felt that their concerns were not being taken seriously.

KIs representing groups at risk also reported similar security challenges, such as robbery (24/109) and physical violence (34/109), although they also reported discrimination against minority groups (15/109) as a concern. A female KI representing an ethnic or religious minority stated that “they are underlooked and always attacked by the majority groups”. Another KI, representing people with disabilities, reported that “people with disabilities face security challenges because people in the community know that they cannot report incidents and so themselves and their homes are often targeted”.

GBV was relatively frequently reported by representatives of the host community (18/32). Both host community KIs residing in settlements and in Kampala mentioned unemployment as the first source of security challenges in the community.

Security challenges outside the community
The top reported security challenges faced outside the community were similar across the different types of targeted respondents, with physical violence or attacks, robbery, disputes with people from outside the community and GBV as the most commonly reported security challenges by the refugee respondents in the year prior to data collection. In general, male respondents more frequently reported fear of physical violence outside the community (67%) than female respondents (51%).
Figure 13 Main security challenges experienced by community members outside their community in the year prior to data collection, as reported by refugees residing in settlements

During the 46 FGDs carried out with refugee children, the main reported dangers were said to come from the host community, with roughly half of the FGDs (21/46), particularly female FGDs, reporting GBV by host community members. Moreover, in 15 FGDs discrimination from host community members to refugees was reported, for example giving higher prices for transportation and other goods and services, and in 14 FGDs violence from the host community towards refugee children was reported, particularly while children were out collecting firewood or water. 12 FGDs reported child labour outside the community, particularly for boys, with examples given of refugee boys doing work for host community members and not getting paid. In 4 FGDs, 3 of which were female, engagement in prostitution outside the community was also reported.

Table 6: Most frequently reported dangers outside the communities raised during children FGDs

<table>
<thead>
<tr>
<th>Reported dangers outside the community</th>
<th># children FGDs (total = 46)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GBV by host community members</td>
<td>21</td>
</tr>
<tr>
<td>Discrimination from host community members</td>
<td>15</td>
</tr>
<tr>
<td>Violence from host community members</td>
<td>14</td>
</tr>
</tbody>
</table>

According to the FGDs, the reasons for the dangers faced by children outside the community were caused by the host community taking advantage of them (11/46), which is exacerbated by the lack of food in the settlements forcing refugee children to move outside the community to
access food (6/46) and the lack of jobs in the settlements forcing refugee children to work in the host community.

Table 7: Most frequently reported reasons for reported dangers outside the communities raised during children FGDs

<table>
<thead>
<tr>
<th>Reported reasons for reported dangers</th>
<th># children FGDs (total = 46)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Host community taking advantage of them</td>
<td>11</td>
</tr>
<tr>
<td>Lack of food in settlements, forcing children to travel outside</td>
<td>6</td>
</tr>
<tr>
<td>Lack of jobs within the settlements</td>
<td>6</td>
</tr>
</tbody>
</table>

Suggested solutions from the community and key interviewed stakeholders

- Need for the police and OPM to strengthen their security by conducting community policing and patrols.
- Increase community initiatives that foster dialogue and provide guidance and counselling.
- Conduct Behaviour Change Communication (BCC) programs that focus on peaceful coexistence between hosts and refugees and the use of land/natural resources.
- Limit exposure to danger in the streets by increasing the availability of basic needs within the settlements and thus decreasing the need for refugees to walk long distances.
- Enhance trainings for parents to learn how to give better guidance to their children.
- Scale up sensitization of both parents and children on the safety challenges faced by children, on sexual and reproductive health and rights, and on the importance of education.
- Government-established clear rules around issues such as land ownership.
- Relocate households from minority groups who are facing discrimination to secure locations.
- Encourage the refugee community to report security issues to the relevant authorities.
- Enhance income-generating activities and livelihoods support.
**Gender-Based Violence (GBV)**

Effective, equitable and participatory humanitarian action cannot be achieved without understanding and responding to the specific needs of refugee women, who are often at heightened risk of GBV during displacement and forced movements due to breakdown in family and community structures.

**General perception of GBV**

Both qualitative and quantitative findings from the participatory assessment show that refugees were exposed to various forms of gender-based violence. Notably, despite a vast majority of refugee respondents reported that community members were exposed to some form of GBV (82%), only 15% of refugee respondents in settlements reported it as a main security challenge experienced by community members in the year prior to data collection. In the settlements, 17% of female refugees and 13% of male refugees reported GBV as a main challenge faced by community members.

In Kampala, a notably lower, but still high, proportion of refugees reported exposure to GBV (53%), and 6% reported it as a main security challenge. Notably, GBV was reported as a main challenge by 13% of female refugees in Kampala, while it was not reported as a challenge by their male counterparts.
The difference between the proportion of refugee respondents reporting that community members were exposed to some form of GBV (relatively high) and the proportion reporting GBV as main security challenge (relatively low) might be due to stigma associated to GBV or fear to report GBV incidents compared to other security challenges.

*Figure 14* % of refugee respondents reporting GBV as a main security challenge experienced by community members in the year prior to data collection, by location

The **most commonly reported GBV type** voiced by 15% of the refugee respondents indicating GBV as a challenge was *physical violence inside the household* (51%), followed by *sexual violence* (43%) and *forced marriages or child marriages* (38%). The most commonly reported type of GBV reported by refugees residing in Kampala was sexual violence (21%).

Gender-based violence was mentioned as a safety risk for boys and girls throughout the vast majority of the FGDs with refugee children. Children emphasised risk of exposure to GBV while collecting basic resources such as water and firewood, particularly after sunset.

**Availability of services for GBV survivors and preventative measures**

The vast majority of refugee respondents residing in settlements (90%) reported that services are available and accessible to GBV survivors, mainly in the form of **legal support** (64%), **medical support** (63%), and **psychosocial support** (46%). Similarly, the majority of refugee respondents in settlements indicated that there are measures and services available in the community to prevent GBV, namely: community mobilisation for information sharing (71%), women and girl centres (44%) and the presence of community activists (34%).

According to refugee respondents in Kampala, the availability of services for GBV survivors was reportedly lower, with 47% of respondents reporting that at least one service was available. Significantly, **42% of refugee respondents residing in Kampala reported to not know** or not want to answer regarding the availability of services, compared to a much lower 5% of refugee respondents residing in settlements, which may indicate a lack of awareness and/or existence of appropriate services. The three most commonly reported services available were the same as for refugees residing in settlements, namely legal support (44%), medical support (30%), and psychosocial support (18%).
According to groups at risk KIs, services for GBV services that have been working well are GBV psychosocial and counseling services (14/82), GBV awareness creation and community dialogue activities (12/82), and GBV case management and follow-up (11/82).

**Challenges in reporting GBV incidents**

**Three quarter of refugees residing in settlements reported survivors of violence are able to safely report GBV incidents in their community (74%),** with 75% of female refugee respondents and 73% of male refugee respondents reporting this. Of the 22% who reported it is not (always) possible to safely report GBV incidents, the most commonly reported challenge was the fear of stigma and the fear or repercussion from the perpetrator.

*Figure 15 Main reported challenges that GBV survivors face in reporting GBV incidents, as reported by the 22% of refugee respondents residing in settlements who reported that it was not (always) possible to safely report GBV incidents*

Only a third of refugees residing in Kampala (35%) reported the ability to safely report GBV incidents.

For **groups at risk, similar challenges were reported**, such as fear of stigma and repercussions from family members, in addition to the preference to resolve incidents at a community level. A male KI representing a religious or ethnic minority reported that GBV survivors “fear death threats from the perpetrators, and fear that reporting will worsen their situation”. Another KI, a South Sudanese woman, emphasised the repercussions that certain survivors face from their family which makes them less likely to report GBV incidents: “Back in South Sudan, issues of GBV are not considered criminal, so if you report GBV cases and the perpetrator is arrested, this builds family hatred towards the victim and can also lead to economic hardship”.

**Suggested solutions from the community and other interviewed key stakeholders**

- Increase community sensitization and awareness raising on GBV cases.
- Improving surveillance and security in the settlements.
- Increasing household income through implementing economic empowerment programs.
- Provide course on positive and responsible parenting.
• Ensuring that perpetrators are held accountable.
• Increase access to GBV centres to address GBV reporting challenges.
• Protect the survivor and their family from retaliation from perpetrators.
• Facilitate transportation for survivors to attend court case hearings.
• Continue to provide the community with GBV psychosocial support and counselling services with trained professionals.
• Strengthen follow-up and management of GBV cases to ensure quality case management of GBV cases.
Peaceful Coexistence
Refugees flee their countries of origin due to conflict, civil strife, war, and persecution among other things, forcing them to seek asylum or refuge in other countries. Mistrust and division (including along ethnic, political or religious lines) originating from countries of origin can trigger tensions and conflicts amongst refugee communities in countries of asylum unless there is confidence building and reconciliation. The arrival of large numbers of refugees can also lead to new conflicts with host communities or among refugee communities, for example through increased pressure on resources and services, or the real or perceived favouring of one group over another. Such tensions and conflict present tangible risks to safety, security and peaceful co-existence of refugees, undermining the protection that refugees sought when fleeing to their country of asylum.

General perception of coexistence between refugees and the host community
Overall, refugee respondents were positive about the relationship between refugees and the host community, with 74% of refugee respondents reporting the relationship as “Good” or “Very good”. Notably, refugees residing in Kampala were more positive than those residing in settlements. Despite the overall perception of refugee respondents, some groups identified a number of dangers and challenges particularly coming from the interaction with the host
community. Particularly, children during the FGDs reported discrimination, child labour, violence and even prostitution (for more details see section on security inside and outside the community from page 28).

Figure 16 Relationship between refugees and host community, as reported by refugees residing in settlements VS in Kampala

In terms of the refugee respondents both in settlements and in Kampala that reported that the relationship with the host community was poor or very poor, the proportion varied slightly depending on their location, as can be seen on the graph below. The locations in which the highest percentage of refugees reported that the relationship was poor or very poor were Nakivale and Oruchinga, which are the two settlements in the most southern refugee-hosting district (Isingiro) on the Tanzanian border.

Figure 17 Percentage of refugee respondents reporting the relationship between refugees and the host community as poor or very poor, per location

<table>
<thead>
<tr>
<th>Location</th>
<th>South-West</th>
<th>West Nile</th>
<th>Central</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kyaka</td>
<td>11%</td>
<td>13%</td>
<td>14%</td>
</tr>
<tr>
<td>Kyangwali</td>
<td>1%</td>
<td>4%</td>
<td>6%</td>
</tr>
<tr>
<td>Nakivale</td>
<td>15%</td>
<td>10%</td>
<td>3%</td>
</tr>
<tr>
<td>Oruchinga</td>
<td>4%</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Rwamwanja</td>
<td>4%</td>
<td>6%</td>
<td>8%</td>
</tr>
<tr>
<td>Adjumani</td>
<td>13%</td>
<td>7%</td>
<td>3%</td>
</tr>
<tr>
<td>Bidi bidi</td>
<td>10%</td>
<td>4%</td>
<td>9%</td>
</tr>
<tr>
<td>Imvepi</td>
<td>6%</td>
<td>7%</td>
<td>4%</td>
</tr>
<tr>
<td>Kiyandongo</td>
<td>3%</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Lobule</td>
<td>6%</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>Palabek</td>
<td>14%</td>
<td>6%</td>
<td></td>
</tr>
<tr>
<td>Palorinya</td>
<td>6%</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>Rhino Camp</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kampala</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Reasons of conflict between refugees and the host community

The main reasons reported by refugee respondents rating the relationship as “Okay”, “Poor”, or “Very poor” for conflict with the host community were related to **competition over resources, particularly over firewood and land** (both reported by 47% of respondents) and dispute over grazing of cattle / destruction of crops. In Nakivale, where the proportion of respondents rating the relationship with the host-community “poor” or “very poor” is the highest, the main reasons is disputes over grazing (78%), followed by **competition for land and firewood** (respectively 62% and 51%). In Oruchinga, the most common reported reason is **competition for land** (48%) followed by **cultural misunderstanding** (42%).

\[Figure 18\] Main reasons of conflict between the host community and refugees in the area, as reported by refugees in settlements.

The 46 FGDs conducted with the refugee children allow for more insight on the conflict between both communities. Indeed, **children in several FGDs showed concern following certain actions and behaviours coming from the host community**, which they felt quite threatened by. In 11 FGDs, children reported that a **reason for danger was the host community taking advantage of refugees**, by not paying them for their labour when they would move outside the settlement to access jobs and resources. 14 FGDs also mentioned **violence from the host community towards refugee children**, particularly while children were out collecting firewood or water.

When looking at **the perception of the host community**, a similar pattern of tension between both communities can be identified. The most commonly reported reasons by host community KIs were **competition over land due to the increasing refugee population and perceptions of favourable treatment of one group**, with mentions of better services being provided to refugee, as reported by half of the KIs. This **general lack of resources**, both for refugees and the host

\[11\] This indicator used multiple choice answers, therefore the % indicated refers to the % of respondents who raised this as one of the reasons and the total does not add up to 100%. 
community, was reported to be the cause for competition over resources and thus can explain the mentions of hostility from the host community towards refugees mentioned during the FGDs with children (7/46). Among the host community, there is a general perception that the refugees receive a more favourable treatment by the authorities, NGOs and UNHCR. This was reported as another reason for conflict by 14/32 host KIs. Other reasons frequently reported by host community KIs for conflict were competition over jobs, livelihoods and access to markets, and disputes over grazing of cattle or destruction of crops by animals.

In terms of the impact of COVID-19 on the relationship between the host community and refugees, both settlements and Kampala host community KIs reported the worsening of the economic situation and limited peaceful activities between refugees and hosts being a key factor.

**Perceived relations within the refugee community**

The relationship between refugees was rated as either “Good” or “Very good” by the majority of both refugees residing in settlements and those residing in Kampala (86%).

*Figure 19 % of refugee respondents rating relationship between refugees as “Good” or “Very good” by location*

Among those who reported the relationship to be “Okay” or “Bad”, the main reported reasons for communal conflicts among different groups within the refugee community (e.g. among different nationalities, ethnic groups, or tribes) were: historical disputes leading to tensions between different ethnic groups or tribes originating in country of origin (61%) and cultural misunderstanding (35%). In both Nakivale and Oruchinga, the large majority of respondents (78% and 81% respectively) reported historical disputes as main reasons for conflict within their community. In Oruchinga, 69% of the respondents raised cultural misunderstanding as important reasons for conflict.
Perceived relations with other refugee groups

Overall, a mere 3% of refugee respondents in settlement rate their relationship with other refugee groups as poor or very poor. A relatively larger proportion of refugees from Burundi and the DRC reported this. When looking at differences between nationalities we can see that the Burundian and Congolese refugees living in settlements were slightly more likely than other nationalities to report the relationship with other refugee groups to be poor or very poor (9% and 5% respectively). However, since the sample for this group is very small this finding should not be considered representative of the whole Burundian and Congolese communities. In Kampala, an overall 5% of refugee respondents reported their relationship with other groups to be poor. Differences among nationalities from refugee respondents residing in Kampala can be appreciated; only refugees from Rwanda and the DRC reported the relationship with other groups to be poor or very poor, with 20% and 7% respectively. Considering the modest sample size for respondents from Kampala, differences by nationality shall be interpreted as indicative only, rather than representative of the different communities.

Figure 20 % of refugee respondents in settlements rating the relationship with other refugee groups as poor or very poor, by nationality of respondents

Suggestions from the community and other interviewed key stakeholders

- Implement shared and transparent projects targeting both refugee and host communities especially in relation to resource allocation.
- Foster community dialogue and engagement activities between both communities, such as sport tournaments and cultural galas.
- Strengthen capacity of local leadership.
General perceptions of access to health care

Despite access to health care being reportedly high, the quality of the care received is not always meeting the needs of the beneficiary communities. Two-thirds of refugees residing in settlements reported that a family member had fallen sick in the 3 months prior to data collection, of who nearly all (95%) went to seek treatment. Most commonly, refugees reported to seek treatment at health centres (76%), while a lower proportion reported seeking treatment at hospitals (17%) or private clinics (4%).

However, refugees residing in settlements did not agree on the extent to which health services met the needs of their community. Of those who reported that available health services did not cover the community’s needs, the general provision of health services (health workers, medicines, referral etc.) was most commonly reported as lacking (84%).
Across settlements, 39% of refugee respondents reported that health services in the settlement were not meeting all health needs in the community. Differences across settlements are notable; for example, in Nakivale, 74% disagreed or strongly disagreed that health services could meet all needs. On the opposite, Lobule was the settlement with the lowest proportion of respondents indicating that health services could not meet their needs. In Kampala, 53% of refugee respondents reported that health services were unable to meet all needs. Of those that reportedly disagree or disagreed strongly that health services could meet all needs, the most commonly reported health service issues by both refugee respondents in settlements and in Kampala were related to staffing and provisions (84%) and malaria care (28%).

Figure 21 Extent to which refugees in settlements agree that health services meet the needs of their community

Figure 22 % of refugee respondents reporting that health services in the community cannot meet all health needs, by location
Challenges in accessing health services

Across all KIIs from the refugee communities and refugee respondents, top reasons for family members not to seek treatment were: long waiting time at the health facility; unable to reach the health facility due to distance/lack of transport; no treatment available for their needs. In almost half of the children FGDs (22/46), it was reported that there were children in the community of FGD participants who had fallen sick but were unable to access health services. During these FGDs, the same barriers mentioned above were most commonly reported: health facilities being too far and lack of transportation to health facilities (26/46). Additional barriers reported during the children FGDs were the poor quality of available treatment (21/46) and the fear of being given the wrong medication (10/46). In 8 FGDs, all being female FGD groups, it was reported that health staff was showing poor behaviour and in 1 female FGD sexual harassment by health workers was reported. Girls in 2 FGDs indicated to feel uncomfortable to open up to male doctors and said there were too few female health staff available. Uniquely, it was reported in 8 FGDs that children feared going to health centres as they believed it would immediately be assumed that they had COVID-19 and that they would be put into isolation.

Table 7: Most frequently reported challenges in accessing health services during FGDs with children

<table>
<thead>
<tr>
<th>Reported challenges in access health services</th>
<th># children FGDs (total = 46)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health facilities being too far/Lack of transportation</td>
<td>26</td>
</tr>
<tr>
<td>Poor quality of available treatment</td>
<td>21</td>
</tr>
<tr>
<td>Fear of being given the wrong medication</td>
<td>10</td>
</tr>
</tbody>
</table>

In addition, KIs representing groups at risk also commonly reported not feeling treated well by health staff as a reason, mentioning poor attitudes of staff and discrimination towards people with disabilities and minority groups (11 KIs). One KI reported that “Older persons are not taken seriously and some medical staff ask for money”. KIs representing groups at risk also frequently mentioned language as a barrier, with one KI specifically mentioning that “there is no interpreter for Darfur language at the health centres and facilities”, which they raised as a reason for the challenges that certain ethnic minorities face in accessing health services.

According to host community KIs residing both in districts hosting refugee settlements and in Kampala, the most commonly reported challenge in accessing health care was the inability to reach the health facility due to distance or lack of transport, reported by 19 KIIIs in settlements and 3 KIIIs in Kampala. They also reported the lack of sufficient health workers and a long waiting time at the health facility. Both groups of host KIs cited the funding gap in the health sector as the main reason explaining the challenges in accessing health care.

COVID-19

As of the time of data collection, just over half of the refugees residing in settlements (strongly) agreed that older persons in their community are in favour of taking the COVID-19 vaccination
Among the refugee respondents, who reported to have an older family member living with them (51%), less than a fifth of them (23%) reported that either all or some of the older members of their family were vaccinated, as of the time of data collection. For those who had not been vaccinated, the most common reasons for not being vaccinated were: the non-availability of the vaccine (43%); the side effects of the vaccine (25%); older persons not being sensitized about the vaccines (13%).

Figure 23 % of refugee respondents reporting on the vaccination status of family members older than 50 years at the time of data collection

Three out of seven KIs representing older persons reported the vaccine to not be safe as a reason for reluctance to taking it.

When asked which aspects of the current health program and services were working, the majority of host KIs reported that the vaccination program was working very well.

**Suggested solutions from the community and other interviewed key stakeholders**

- More funding to be given to the District Health Department to increase the number of health centres and improve the facility infrastructure and equipment.
- Improve transportation to health facilities.
- Recruit more health workers to ensure that the facilities are fully staffed, particularly more female staff to ensure a more equitable gender balance, leading to female patients feeling more comfortable.
- Add more services at the health centre III levels\(^\text{12}\) to decongest the referral hospitals.
- Organize community health outreaches.
- Improve the complaint and referral system.

\(^\text{12}\) Health centre level III can be defined as the facility that delivers the Intermediate Referral Activity Package of the National Minimum Health Care Package (MHCP). It handles referrals from health centre II level, as well as referring to health centre IV level. It equates to the sub county level of local government administration. For an overview of the health system structure in Uganda please refer to this document [https://www.who.int/alliance-hpsr/projects/alliancehpsr_ugandaabridgedprimasys.pdf](https://www.who.int/alliance-hpsr/projects/alliancehpsr_ugandaabridgedprimasys.pdf)
To address the reluctance of older persons to get vaccinated, KIs representing groups at risk suggested the need for more counselling and explanation to demist the myths about the COVID-19 vaccine and create more sensitization and awareness workshops within the community.

**Mental health and psychosocial support (MHPSS)**
Refugees residing in settlements did not agree on the extent to which MHPSS services were available and met the needs of their community. Forty-nine (49) percent of refugee respondents, two third of KIs for key stakeholders and three quarter of KIs for groups at risk reported challenges in accessing MHPSS services. **Reported main challenges in accessing MHPSS varied across different types of respondents**, but were most commonly: *stigma, people are ashamed to look for mental health support; no treatment available for their needs; long waiting time for MHPSS services.*

*Figure 24 Extent to which refugees residing in settlements agree that the mental health and psychosocial support service are available and meet the needs of their community*

**Suggested solutions from the community and other interviewed key stakeholders**
- Hire more trained staff in MHPSS that are specialised in mental health and that know how to treat MHPSS patients appropriately and confidentially.
- Sensitise the community on the importance of MHPSS.
- Employing more translators at health centres to ensure that ethnic minorities do not face language barriers when seeking health services.
Livelihoods

General perception of access to livelihoods support
The majority of refugee respondents residing in settlements (72%) and in Kampala (55%), as well as KIs representing the host community reported that members of their respective community had received some sort of livelihoods support in the year prior to data collection. Those residing in settlements most commonly reported training and skills development (36%) and agricultural inputs (including access to agricultural land) (35%). The refugee respondents residing in Kampala also commonly reported trainings and skills development (36%), followed by access to financial services to manage household needs (e.g. clothes, food, other household items etc.) (15%).

Slightly less than half of refugees residing in settlements found that the livelihoods support delivered was meeting the needs of their community (49%), while the other half disagreed (40%).
Figure 25 Extent to which refugees residing in settlements agree that the livelihoods support delivered is meeting the needs of their community

Overall, 39% of refugee respondents in settlements reported that provided livelihoods support was not able to meet all needs in the community. In Kampala, only 6% of refugee respondents disagreed that livelihoods support was able to meet the needs of the community. Notably, 26% reported to not know whether or not the livelihoods support was meeting the needs of the community, suggesting that livelihoods support might not be much present in Kampala. When looking at the settlements, a few settlements stand out in particular due to some prominent differences in the reporting of livelihoods support. For instance, in Nakivale and Kyaka II respectively, 83% and 76% of households indicated that support was not meeting needs. In terms of gender, there is no significant difference between the percentages of refugees indicating that delivered livelihood support meets the needs of the community. Among female refugees in settlements, 41% reported that support was not able to meet needs, compared to 39% of male refugees.

Figure 26 % of refugee respondents reporting that livelihoods support in the community is not meeting the needs of the community
Host community members most commonly reported having received similar livelihood support to refugees. In addition to what was reported by refugees, host KIs also reported receiving livestock support and support for business start-up and other income generating activities.

Refugees that reported not all livelihood needs were met, were additionally asked what needs specifically were not being met. The most commonly reported needs were for agricultural inputs (57% of refugee respondents that reported not all needs were met) and livestock support (55%). The graph below shows the other commonly reported needs not currently being met in the settlements.

Figure 27: Among refugees that reported that provided livelihoods support was not able to meet all needs in their community (40%), top 5 most commonly reported needs that are not currently being met by livelihoods support in the settlements

- Access to agricultural inputs: 57%
- Access to livestock support: 55%
- Business-development support: 50%
- Access to training and skills building: 49%
- Access to financial services: 22%

Challenges in accessing livelihood support
The lack of access to information about available livelihood opportunities was the most frequently reported challenge in accessing livelihood support across all KIs and refugee respondents.

KIs representing groups at risk also commonly reported not being chosen for programs as a common challenge (33/109) and that UNHCR and partners were not providing livelihoods support in their community (30/109).

Suggested solutions from the community and other interviewed key stakeholders
- Provide sufficient funding for the livelihoods sector including livelihood start-up capital, specifically to refugees.
- Improve information sharing and community participation in livelihood programming.
- Stop discrimination in livelihood support towards minorities and ensure equal participation for all in the livelihoods programs.
- Offer trainings on financial literacy, language and employability skills.
- Include community stakeholders in the project design so that the needs of the community are addressed.
**Education**

The New York Declaration for Refugees and Migrants pinpoints education as a critical element of the international refugee response and Sustainable Development Goal 4 aims to deliver “inclusive and quality education for all and to promote lifelong learning”. The Education Response Plan for Refugees and Host Communities in Uganda (ERP) sets out a realistic and implementable plan to ensure improved learning outcomes for increasing numbers of refugees and host-community children and adolescents across Uganda. Despite efforts made by UNHCR, partners and the government of Uganda to ensure quality education for all refugee children in Uganda, many challenges remain, as also shown by the findings of the participatory assessment.

**General perception of access to education**

In most of the 46 FGDs conducted with children, they reported enjoying school as they believed that going to school was for them an opportunity to gain new skills and knowledge (25/46), and increase their chances of getting a job later on (19/46). In 14 FGDs, children also felt that school was a safe environment for children.

**Challenges in accessing education prior to COVID-19**

During the 46 children FGDs, refugee children were asked specifically on reasons why they would not go to school prior to the pandemic. Children participating in 29 FGDs reported that the most common reason for not going to school was the inability of parents to support their children.
with the correct supply of scholarly materials and school uniforms. In 23 FGDs, children also reported lacking resources for paying school fees, especially those attending secondary school who were reportedly chased out of school due to miss payment of school fees. A challenge to accessing education that was reportedly affecting girls was child marriages and teenage pregnancies, reported in 19 FGDs.

**Challenges in accessing education following COVID-19**

In most of the 46 FGDs, children reported that they continued to learn during the pandemic by using the reading materials distributed by NGOs or UN agencies (26/46), while others mentioned community discussion groups and home learning provided by teachers (20/46) as other ways to continue learning. However, participants in 15 FGDs reported that children could not continue to learn during the pandemic.

**School closures** due to the COVID-19 pandemic was the most commonly reported challenge in accessing education. A third of KIs representing groups at risk also reported boys, girls, and other learners in their community – particularly girls, women with disabilities or of ethnic or religious minorities – had stopped learning since the school closures. One out of the 109 KIs representing groups at risk explained that “lessons delivered during COVID-19 only allowed learners from well-off families to access the different media to access learning”. The same challenges relating to school closures were reported by key stakeholders and host communities. Refugee children in the 46 FGDs provided insights on the difficulties children faced when schools shut down, namely lack of support from teachers (20/46), challenges in accessing phones and radios (17/46) and lack of or inadequate learning materials to learn from home (12/46).

*Figure 28 Challenges children face in accessing education, as reported by refugees residing in settlements*

Across settlements, 95% of refugee respondents reported at least one challenge that children in the community face when accessing education services. The most commonly reported challenges were school closures due to COVID-19 (52%) and the cost of education (40%). School
closures due to COVID-19 were reported reasonably commonly across all settlements. However, costs of education as a challenge was not uniformly reported. In Nakivale, 88% of refugee respondents reported cost as a key challenge, compared to 4% in Imvepi. The extent to which lack of education materials was considered a key challenge also differed from settlement to settlement, as it was reported by 60% of refugee respondents in Bidibidi but only by 10% of refugee respondents in Kiryandongo and Palorinya.

In Kampala, 79% of refugee respondents reported challenges for children when accessing education. The most commonly reported challenge in Kampala was the cost of school fees, which was reported by 73% of refugee respondents in the city. COVID-19 related school closures were only reported as a key challenge by 21% of refugee respondents in Kampala.

Key stakeholders and groups at risk KIs reported different mechanisms were being used by children to continue learning, such as print media, radio, and having private lessons by teachers.

During the FGDs, the children who had completed secondary education were asked if they were informed about higher education programs within or outside Uganda. In 33 FGDs, children reported being informed of higher education programs, including universities, vocational schools and diplomas. Those who reported not being informed (12/46), said they had no access to information and little to no career guidance.
Suggested solutions from the community and other interviewed key stakeholders

- Improve remote learning by providing more readings materials and study gadgets such as phones and radios.
- Setting up small home classes with teachers to support remote learning.
- Construct more primary and secondary schools and classrooms in both the refugee and host community.
- Sensitise the community on the importance of education.
- Employ more refugee teachers in national schools.
- Encourage refugees to enrol in national schools.
- Introduce equal school requirements and support to both refugees and hosts children, including scholastic material.
Water, sanitation, and hygiene (WASH)

General perceptions in accessing WASH

Roughly two thirds of refugee respondents in the settlements reported challenges in accessing water in their community. In 17 FGDs, children indicated that there were families in their community who would sometimes have insufficient water at home.

Figure 30 Extent to which refugees residing in settlements agree that the water support delivered is meeting the needs of their community

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Don’t know
Overall, **32% of refugee respondents in settlements reported that water support delivered in the community was not sufficient to meet all needs**. In two settlements, *this percentage was significantly higher, namely in Nakivale (75%) and Kyaka II (57%).* Among the refugees in settlements that reported not all needs were being met, the most **commonly reported unmet needs** were *sufficient water for domestic use (80% of the 32% subset) and sufficient water for drinking (71% of the 32% subset).*

*Figure 31% of refugee respondents reporting that current water services are not meeting the needs of the community, by settlement*

**Challenges in accessing water**

The 32% of refugee respondents stating that the water services were not meeting the needs of the communities also identified the main reasons for these challenges. Namely, refugee respondents mentioned low water pressure at water sources/low water quality at water sources/boreholes are in bad state (37%); queues at the water sources (28%).

When questioned about the same issue, around two-thirds of host community KIs flagged the lack of clean water sources within 30 minutes from homes as a barrier.

For groups at risk KIs, the most common challenges were reportedly queues at the water sources and far distance to the water sources. Some KIs also added that people with disabilities were unable to carry water home over the long distances.
Suggested solutions from the community and other interviewed key stakeholders

- Increase number of boreholes and tap stands to address overcrowding and insufficient supply of water.
- Increase the water source maintenance budget.
- Provide regular maintenance of the water systems.
- Distribute water collection containers to households to facilitate water collection.
- Provide the communities with WASH sensitization, especially on water systems management.
- Ensure timely repair and maintenance of water systems.
- Improve hygiene at the water points through routine system maintenance and regular cleaning of water collection containers using soap to avoid contaminating the water.
Environment and energy

General perceptions of energy services provision
More than half of refugees residing in settlements (56%) reported that the energy services delivered did not meet all the needs of their community. The main unmet energy needs mentioned by refugee respondents were: cooking fuels (90%); efficient cooking technology/access to clean energy (65%); affordable fuels and technologies (49%).

Challenges in accessing traditional energy services
According to refugee respondents, challenges in accessing traditional energy fuels were most commonly reported to be linked to availability, affordability and safety concerns. The below graph indicates the most common challenges related to accessing traditional energy per settlement. For example, in Rwamwanja, the most commonly reported challenge was the cost of charcoal (75%). The most common challenge for accessing traditional sources of energy diverges quite significantly from settlement to settlement.
Figure 32 Main challenges in accessing traditional energy fuels (firewood, charcoal) faced by the community, according to refugee respondents residing in settlements

Whereas in some settlements the primary challenge is scarcity, for example in Nakivale and Kyaka II, it is a relatively minor issue in Palorinya and Rhino Camp, where host community resistance and distance are more significant challenges. The fifth most commonly reported challenge was safety on the route to collect firewood. This was not included in this graph as it was not the most commonly reported challenge in any of the individual settlements.

Figure 33 Top 4 overall most commonly reported challenges to accessing traditional energy sources by settlement

Similarly, the challenges reported by key stakeholder, groups at risk and host KIs revolved around availability and affordability, with KIs reporting limited access to firewood due to the limited
availability of trees and deforestation due to crop farming. It was also mentioned by groups at risk KIs that the high demand for firewood has contributed to conflicts and GBV between refugees and host community members. Multiple KIs reported that the host community are restricting refugees’ access to firewood and that there were incidents of both general violence and GBV affecting refugees while fetching firewood that the host community considers belonging to them.

**Challenges in accessing environmentally friendly energy services**

The use of environmentally friendly energy fuels and technologies were generally low for both refugees and host communities.

*Figure 34 Main challenges in accessing environmentally friendly energy fuels and technologies faced by the community, according to refugees residing in settlements*

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchase of solar panels is expensive</td>
<td>73%</td>
</tr>
<tr>
<td>Improved cookstoves are expensive</td>
<td>46%</td>
</tr>
<tr>
<td>Briquettes are expensive</td>
<td>40%</td>
</tr>
<tr>
<td>Solar products available are not of good quality</td>
<td>8%</td>
</tr>
</tbody>
</table>

In 10 key stakeholder KIs, the respondents reported that very low household income was the main reason for the challenge in accessing environmentally friendly energy. They also added the lack of awareness of the available clean energy alternatives as a barrier, and that there were few vendors of clean energy alternatives in the community.

**Solid waste management**

According to the refugee respondents, the most common way to manage solid waste (such as plastic, old batteries, damage solar panels, etc.) is to put them in a pit (71%). However, around a third of respondents also mentioned that they burn the solid waste in an open space. Selling the garbage (16%) and recycling (7%) are not common ways to deal with waste management. Proper solid waste management practices seem to be lacking in the settlements and considering the impact on the environment of such practices this is an issue to be taken into consideration from the humanitarian actors and local authorities.
Suggested solutions from the community and other interviewed key stakeholders

- Provide access to cheaper and clean energy sources.
- Upscale up tree-growing interventions to match the rate of deforestation at both household and community level, through providing land for growing trees, tree seedlings and some capital to maintain the woodlots.
- Establish dedicated woodlots in the refugee community, so that refugees can be self-sufficient and reduce their need to travel to host territories to access fuel wood. These woodlots should be established based on assessment of the energy demand of the intended beneficiary, and should have detailed management and harvesting plans for sustainability.
- Enhance trainings and sensitization activities for households on the use of clean energy technologies and environmental conservation.
- Support the community with alternative sources of energy for cooking.
- Subsidise price of clean energy technologies.
- UNHCR to repair the community solar lighting systems.
Shelter

General perceptions of shelter conditions

Refugees most commonly said that they buy their shelter materials in the market (65%), collect them from the forest (36%) or build with their own materials (24%).

Key stakeholders and representatives of groups at risk most commonly reported receiving construction materials from partners or UNHCR as a way for families to meet their shelter needs (compared to only 20% of phone survey respondents of refugees residing in settlements).

Challenges in construction/maintenance of shelter structures.

Unavailability and unaffordability of construction materials were the most commonly reported challenges faced by refugees residing in settlements.

Lack of materials and high costs appear to be common challenges to shelter maintenance and construction across the settlements. The main difference between challenges reported per settlement seems to be related to the extent to which bad weather causes damages. This was most commonly reported in Bidibidi (56%), Palorinya (49%), and Nakivale (39%). Bidibidi and Palorinya are both located in the West Nile near the South Sudanese border, while Nakivale is in the South West towards the Rwandan border, indicating that this challenge is not region- or area-specific.
Figure 37: Main challenges that refugees face for construction and/or maintenance of their shelter structures, as reported by refugees residing in settlements

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of material to build/repair the shelter structure</td>
<td>72%</td>
</tr>
<tr>
<td>Material are too expensive</td>
<td>55%</td>
</tr>
<tr>
<td>Bad weather often damages our shelter structures</td>
<td>29%</td>
</tr>
<tr>
<td>Lack of support from UNHCR / Partners</td>
<td>25%</td>
</tr>
<tr>
<td>Some households are not able to build/repair their shelter structure</td>
<td>5%</td>
</tr>
</tbody>
</table>

There are also some discrepancies related to the extent to which shelter support is deemed sufficient. In Palabek, for example, only 3% reported lack of support as a key challenge, compared to 60% in Kyaka II.

Key stakeholders reported very similar challenges, with the top 3 most reported challenges across the 42 key stakeholder KIs were limited availability of shelter materials provided by partners such as UN, NGOs, etc. (10/42), lack of construction materials in the community (9KIs) and bad weather damaging structures (5/42).

Over a third of the 109 representatives of groups at risk (41/109) reported the inability to build/repair shelter structures as a challenge. Challenges only reported during groups at risk KIIs were that persons with disabilities are not able to repair their shelter due to their disabilities and
they do not have family members willing to support them in repairing their shelter (14/109). In one KII it was mentioned that support was only provided to older persons.

**Coping mechanisms**

Groups at risk were reportedly relying more on others for constructing their shelters than other refugees, such as help from friends/family (51/109), help from other people in the community (47/109) and borrowing money from friends/family (27/109). According to KIs, groups at risk such as older persons or persons with disabilities were also more commonly unable to do any work autonomously on their shelter structures (17/109).

*Figure 38% of refugee respondents reporting on ways that refugees in settlements have met their shelter needs for construction and maintenance works*

According to KII with groups at risk, persons with specific needs often seek help from friends and family members in the reconstruction and maintenance of their shelter (42/109) and some borrow money from friends and family (23/109). Thirty-seven (37) of these KIs also reported that community structures have been helping households with construction and maintenance, but **13 reported that some households were not able to do any work on their shelter.**

**Suggested solutions from the community and other interviewed key stakeholders**

- Provide more funding and construction materials to rebuild shelters.
- Provide adequate and good quality materials.
- Allow refugees to use iron sheet.
- UNHCR and partners to strengthen the referral system.
- Partners to provide support to persons with specific needs who need construction support.
- Capacity building by providing trainings/workshops to teach refugees how to produce their own shelter materials.
- Involving community leaders in the shelter programming.
- UNHCR, partners and authorities to build semi-permanent structures.
**Community Participation and Accountability to Affected People (AAP)**

**Perception of community participation**

Generally, refugees in settlements mentioned at least one community support structure that was aiding the well-being of the community. A mere 1% reported that no community support mechanisms were present in the settlement. The settlement with the highest percentage of refugees reporting no present community support structures was Kyangwali (6%). **In Kampala, on the other hand, 14% reported that there were no community support mechanisms.** While a majority (73%) did report that structures were present, most notably refugee community leaders (55%), it appears that 14% of refugee respondents are not aware of these support mechanisms.

**Existing support mechanisms**

The RWC was the most commonly reported support mechanism for community members facing problems, according to refugees. Block leaders as a support mechanism was commonly reported by refugees in settlements.
Over half of KIs representing groups at risk reported thematic community structures, such as Child Protection Committee, Village Health Team, GBV Community Activist, Neighbourhood Watch Committee, as an existing mechanism.

For children, the most commonly reported sought to support mechanism was not the RWCs, but rather seeking help from local leaders such as the community group leaders, women leaders and block leaders (30/46). In 29 FGDs, children reported also seeking help from police or security officers.

**Challenges faced in accessing community support mechanisms**

The type of challenges faced in accessing community support mechanisms varied across different types of targeted respondents. **Roughly half of refugees in settlements reported challenges in accessing community support mechanisms.** Reported challenges were often related to malpractice in the system (often related to request for payment in exchange of services) and delay in responses. Most refugees residing in Kampala reported no challenges in accessing mechanisms to support community members or not being aware of any.

According to the **refugee children** residing both in Kampala and settlements who took part in the FGDs, the most common challenge they faced when seeking help was the **delay in response** (20/46). Certain **girls mentioned** that when they reported GBV to the community chairpersons they would **delay taking action** which would allow the **perpetrator to escape**. They also added in 16 FGDs that complaints from certain people are not taken seriously so that demotivates them.
Two-thirds of **groups at risk KIs** indicated that there are challenges in accessing mechanisms to support community members; challenges were most commonly related to **facing discrimination** and long distances / physical barriers.

**Community’s perception of their involvement in aid programming**

When asked about their level of information on available programmes and capacity to influence the aid received through their opinions, respondents are not unanimous. Overall, **roughly two-third (62%) of refugee respondents in settlements** and 45% of refugee respondents in Kampala agreed or strongly agreed that that aid agencies/actors take their community’s opinions into account when providing support to their community. As can be seen in the graph below, there is **significant variation between locations** in terms of respondents agreeing or strongly agreeing that their opinions are taken into account, namely between Nakivale, Kyaka II and Imvepi (where less than 40% of respondents agree/strongly agree that their opinions are taken into account) and Bidibidi (where this proportion is as high as 93%).

**The majority of refugee respondents in settlements (82%)** and in Kampala (62%) agreed or strongly agreed to feel informed about the kind of aid/assistance/services available to them. Despite variation between locations exist also for this indicator, they are less pronounced compared to respondents’ perception on aid agencies listening to their opinions.

*Figure 40 % of refugee respondents agreeing or strongly agreeing that aid agencies take their opinions into account/they feel informed about the aid available to them, per location*
When disaggregated by gender, the results show that **women, particularly those residing in Kampala, are less likely to (strongly) agree** with the statement that aid agencies take their opinions into account and the statement that they feel informed about the aid available to them, than their male counterparts.

*Figure 41 % of refugee respondents agreeing or strongly agreeing that aid agencies take their opinions into account/they feel informed about the aid available to them, by gender*

The majority of refugees in settlements (76%), in Kampala (58%) and KIs representing groups at risk (67%) reported to know how to make suggestions or complaints about the assistance that they receive or any misconduct by staff of any organization.

*Figure 42 % of refugee respondents reporting knowing how to make suggestions or complaints about the assistance that they received, by location*
Female refugee respondents residing in Kampala were less likely to report that they knew how to make suggestions or complaints about the assistance that they received compared to their male counterparts and compared to both female and male refugee respondents in the settlements.

Figure 43 % of refugee respondents reporting know how to make suggestions or complaints about the assistance that they received, by gender

<table>
<thead>
<tr>
<th>Settlements</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kampala</td>
<td>73%</td>
<td>79%</td>
</tr>
</tbody>
</table>

Suggested solutions from the community and other interviewed key stakeholders

- Continue involving refugees and host communities in the planning processes and projects.
- Look specifically into the needs of persons with specific needs and minority groups.
- Continue collaboration between different partners and other relevant minority stakeholders.
- Mobilise more funding to improve community support mechanisms.
- Provide feedback to the community.
- Bring services closer to the community for example through providing transportation, such as distributing bicycles.
- Employ more translators at services.
- To make it easier for children to seek help, there is a need to sensitise parents and community structures.
Conclusion
Wars, violence and persecution in neighbouring countries continues to drive forced displacement into Uganda. In order to best assist those fleeing violence and persecution, refugees must be able to meaningfully participate in the decision-making process that concerns their protection and wellbeing. The data collected during the participatory assessment encourages meaningful participation of persons of concern in shaping UNHCR and partners' interventions, and has provided a comprehensive understanding of the current situation of girls, boys, women and men of concern of diverse backgrounds, including the problems and protection risks faced, underlying causes, capacities and coping mechanisms.

Following the perspectives of refugees, representatives of host communities, groups at risk and key stakeholders, the participatory assessment shows that although diverse capacities exist within the communities to address the challenges identified, many refugees still report that certain services are not being provided for as well as they could be and that they often face challenges in accessing those services. Respondents often voiced that the distance to the service delivery points together with a lack of resources for affording transport cost hamper accessibility. In addition, respondents often reported that malpractices and delays in feedback to complaints hamper access to services. Overall, the participants in this assessment did not report strong safety and security concerns. However, a higher proportion of respondents from Oruchinga, Kyaka, Rwamwanja and Palorinya reported to be concerned with their safety, often in relation to conflict over scarce resources with the host community. Most of the respondents voiced that community members are exposed to GBV.

Ethnic and/or religious minorities, women, older persons, children and persons with disabilities are reportedly facing, more often and more intensively, the overall identified challenges and barriers to accessing services available for their communities.

Overall, the large majority of refugee respondents (strongly) agree that their opinions were taken into account and that they felt informed about the available aid; however, some locations such as Nakivale, Kyaka II and Imvepi, require partners’ attention as the proportion of respondents feeling their opinion are taken into account is as low as 30%.

Finally, the refugee respondents identified as overall priority areas the access to or quality of food assistance, health care, education and shelters.

This participatory assessment provides partners with a comprehensive overview of the situation of the refugee and host communities, shedding light on views and perceptions of diverse groups within these communities on service delivery, the challenges they face and the solutions they suggest to address those challenges. The partners of the Uganda Refugee Response have a unique opportunity to take into account the perspectives of women, men, girls and boys of diverse background of refugee and host communities while designing and implementing their intervention and placing communities at the centre of the response.